

3739



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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	09/751,472	
	Filing Date	12/29/2000	
	First Named Inventor	Mody, Dinesh I.	
	Group Art Unit	3739	
	Examiner Name	Shay, David M.	
Total Number of Pages in This Submission	3	Attorney Docket Number	P028

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="text-align: center; font-size: 1.2em;">Postcard</div>
<div style="float: right; text-align: center;">             RECEIVED              AUG -9 2002              TC 3700 MAIL ROOM           </div>		
Remarks		

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Ross M. Carothers
Signature	<i>Ross M. Carothers</i>
Date	30-JULY-02

### CERTIFICATE OF MAILING

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**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In the Patent Application of  
Applicant: Mody et al.

Ser. No.: 09/751,472

Filed on: 12/29/00

Docket No.: P028

Examiner: Shay, David M.

Art Unit: 3739

For: A TISSUE ABLATION APPARATUS WITH A SLIDING ABLATION INSTRUMENT  
AND METHOD

CERTIFICATE OF MAILING

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Signed:

Ross M. Carothers

**RESPONSE TO RESTRICTION REQUIREMENT**

Hon. Commissioner for Patents  
Washington, D.C. 20231

Dear Sir:

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AUG - 9 2002  
TC 3700 MAIL ROOM

This response is to the Office Action mailed July 12, 2001, wherein the Examiner required restriction of claims 1-297 under 35 U.S.C. 121 as follows:

- I. Claims 1-107, 225-255 and 275-297, drawn to a method of ablating tissue, classified in class 128, subclass 898;
- II. Claims 108-206 and 256-274, drawn to a system for ablating tissue, classified in class 606, subclass 46; and
- III. Claims 207-224, drawn to a guide sheath, classified in class 600, subclass 585.

In response to the Restriction Requirement, Applicants hereby elect Group I, without traverse.

While Applicants believe no fee is required at this time, Applicants request that any fee or additional fee due be charged to, or any overpayment credited to, Deposit Account No. 50-1894. Applicants are entitled to Small Entity Status under 37 C.F.R. §1.27.

Dated: 30-July-02



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